

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Cruz for President**

**A. Full Name (Last, First, Middle Initial)**

**MRS. MARY LOUISE WESTCOTT**

Mailing Address 9299 MARTINIQUE DRIVE

City	State	Zip Code
CUTLER BAY	FL	33189-1725

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.00

**Transaction ID : SA17.865006**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		29		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

53.00

☐ Memo Item

**B. Full Name (Last, First, Middle Initial)**

**KEVIN WESTDYK**

Mailing Address 4301 MILLINGTON DR.

City	State	Zip Code
HIGHLAND VILLAGE	TX	75077-7913

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SWEEPER KING INC

Occupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17.865985**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		29		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**C. Full Name (Last, First, Middle Initial)**

**CHARLES W. WESTER**

Mailing Address 112 LAKEVIEW CIR

City	State	Zip Code
CUMMING	GA	30040-2015

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

830.00

**Transaction ID : SA17.591195**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

2153.00

**Total This Period (last page this line number only)**.....